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Attorney Docket Number | 00007

DESIGN	First Named Inventor	Michael Zimmerman	•				
PATENT APPLICATION		OMPLETE IF KNOWN					
(37 CFR 1.63)	Application Number						
Declaration Submitted OR  Declaration Submitted after Initial	Filing Date						
	Art Unit						
With Initial Filing (surcharge Filing (37 CFR 1.16 (e))	Examiner Name		<del></del>				
required)							
I hereby declare that:							
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.							
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for							
which a patent is sought on the invention entitled:							
Turnkey Reseller Program for Registering Do	omain Names						
(Title of the Invention)							
the specification of which							
is attached hereto							
OR			·				
was filed on (MM/DD/YYYY)	as United States	Application Number or P	CT International				
Application Number and was ame	ended on (MM/DD/YYYY)		(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as							
amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for							
continuation-in-part applications, material information which	n became available betw	een the filing date of the	prior application				
and the national or PCT international filing date of the continuation of the continuat	nuation-in-part application	) of any foreign applicat	ion(s) for natent				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one							
country other than the United States of America, listed belo application for patent, inventor's or plant breeder's rights ce	ow and have also identified	d below, by checking the ternational application by	box, any foreign				
before that of the application on which priority is claimed.	ertinoate(s), or any i or in	terriational application in	g a ,g acto				
			Copy Attached? es No				
Number(s) Country (MM/DI	D/YYYY) NOL		es NO				
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		닐   별					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							

[Page 1 of 2]

This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

## **DECLARATION** — Utility or Design Pat nt Application

	mer Number Code Label		OR 🗸	Corresp	oondence address below		
Name							
Stewart J. Womack							
Address 14455 N. Hayden Road, Suite 219							
City		State			ZIP		
Scottsdale		AZ		85260			
Country	Telephone	Fax					
us	(480) 505-8832		(480) 505-8865				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Michael	n Name Family Name and middle [if any]) or Surname						
Inventor's Signature Mudael					Date 7/7/03		
Residence: City State  Scotts Dale  A	2	Country	A	Citizer	nship USA		
Mailing Address  8 119 E Mathelle Dr							
City Scottspale State A.	Z	ZIP	35255		Country USA		
NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor							
Given Name Family Name							
(first and middle [if any]) Josh Or Surname Coffman							
Inventor's Signature					Date 6/30/03		
Residence: City State	7	Country	<del></del>	Citizer	À		
Mailing Address 6647 E Russell							
City State	) 7-	ZIP	5215	Count	ny ————————————————————————————————————		
Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.							